

120803
16638 U.S. PTO

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
PATENT EXAMINING OPERATION

PATENT

Andrew Ref.: 894CIP

Attorney Docket No.: 1052.051

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

22388 U.S. PTO
10/730419

120803

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of:

Inventor: George P. Vella-Coleiro

For: Digital Pre-Distortion For The Linearization Of Power Amplifiers With Asymmetrical Characteristics

ENCLOSED ARE:

1. Check in the amount of \$810.00;
2. New Application Transmittal (3 pages);
3. Combined Declaration and Power of Attorney (3 pages);
4. Recordation Form (PTO-1595) Cover Sheet (1 page);
5. Assignment (2 pages); and
6. Patent Application with Informal Drawings (1 Cover Page; 17 Pages of Specification; 5 Pages of Claims; 1 Page of Abstract; 9 Sheet of Drawings).

BENEFIT OF PRIOR FOREIGN APPLICATION (35 USC 119):

Not Applicable.

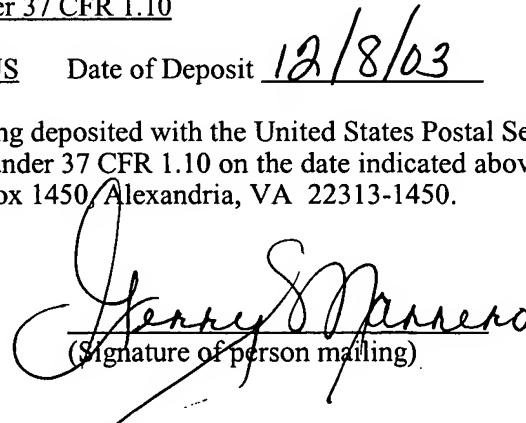
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Certification Under 37 CFR 1.10

"Express Mail" Mailing Label No. EV140153838US Date of Deposit 12/8/03

I hereby certify that this paper or fee is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Gerry Marrero
(Name of person mailing)


(Signature of person mailing)

BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION (35 USC 119(e))

[X] Not Applicable.

BENEFIT OF PRIOR U.S. APPLICATION (35 USC 120):

[] Not Applicable.

[X] In accordance with 35 U.S.C. § 120, applicants hereby claims the benefit of the filing date of a prior U.S. application, namely:

Continuation-In-Part U.S. Application No. 10/607,924 Filed: 06/27/03

ASSIGNMENT:

[X] An Assignment of the invention to Andrew Corporation, a Delaware corporation having a mailing address of 10500 W. 153rd Street, Orland Park, Illinois 60462-3099, is enclosed.

CLAIMS AS FILED:

CLAIMS AS FILED				
	NO. FILED	NO. EXTRA	RATE	CALCULATIONS
Total Claims	19 - 20=	0	x \$18 =	\$0
Independent Claims	2 - 3=	0	x \$86=	\$0
Multiple Dependent Claim(s), if applicable			\$290 =	\$0
Basic Fee				\$770
			TOTAL FEE:	\$770

FEE PAYMENT BEING MADE AT THIS TIME:

[X] Basic Filing Fees \$770
[X] Assignment \$ 40
TOTAL FEES ENCLOSED: \$810

METHOD OF PAYMENT OF FEES:

[X] A check in the amount of \$810.00 to cover the filing fee and the assignment fee.
[] Please charge my **Mendelsohn & Associates, P.C.** Deposit Account No. **50-0782** in the amount of \$_____. A triplicate copy of this sheet is enclosed.

AUTHORIZATION TO CHARGE ADDITIONAL FEES:

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to **Mendelsohn & Associates, P.C. Deposit Account 50-0782.**

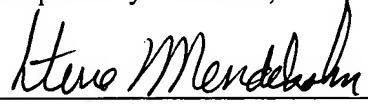
Any additional filing fees required under 37 CFR §1.16 and 37 CFR§1.17.

PLEASE DIRECT ALL CORRESPONDENCE TO:

Customer Number 22186

Date: 12/8/03
Customer No. 22186
Mendelsohn & Associates, P.C.
1515 Market Street, Suite 715
Philadelphia, Pennsylvania 19102

Respectfully submitted,



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Enclosures